



Construction Change Directive

PROJECT: (Name and Address)

Change Directive No.:

Change Directive Date:

TO: (Contractor Name and Address)

Contract No.:

Contract Date:

You are hereby directed to make the following change(s) in this Contract:

Proposed Adjustments

1. The proposed basis of adjustment to the Contract Sum or Guaranteed Maximum Price is:

- ☐ Lump Sum ☐ increase ☐ decrease of \$ _____
- ☐ Unit Price of \$ _____ per _____
- ☐ As Follows: _____

2. The Contract Time is proposed to be ☐ adjusted ☐ remain unchanged. The proposed adjustment, if any, is an ☐ increase ☐ decrease of _____ working days.

When signed by the State and received by the Contractor, this document becomes effective immediately as a Construction Change Directive (CCD), and the Contractor shall proceed with the change(s) described above.

Signature by the Contractor indicates the Contractor's agreement with the proposed adjustments in Contract Sum and Contract Time set forth in this Construction Change Directive.

3. Preparation and execution of an appropriate Change Order will follow.

State

By: _____

Title: _____

Date: _____

Contractor

By: _____

Title: _____

Date: _____